December 10, 2015

Dear Provider,

RE: Monitoring Chronic Viral Hepatitis C Patients Undergoing Treatment for Chronic Viral Hepatitis C

In an effort to improve care provided to patients undergoing treatment for chronic viral hepatitis C (HCV) and prevent unnecessary interruptions in therapy, this notice reiterates Maryland Medicaid's patient monitoring policies.

To assist you in our shared desire for adherence to treatment for chronic HCV, we have developed a treatment plan:

 $\frac{https://mmcp.dhmh.maryland.gov/pap/docs/Hepatitis\%20C\%20\%20Sample\%20Treatment\%20Plan\%20May\%201\%20Final.pdf.$

As HCV therapies have become more tolerable and require less frequent office visits, our clinical guidelines require laboratory testing, which serves as a meaningful way to connect with the patient and promote adherence for the full course of therapy.

For reimbursement to be approved, The Maryland Medicaid Program requires obtaining a quantitative HCV viral load between two (2) to four (4) weeks¹. In addition, all patients should also have a quantitative HCV viral load at the completion of therapy and 12 weeks following the completion of therapy to assess for cure. For those patients who require 24 weeks of therapy, we also require that a viral load be obtained at week 12 for reasons stated above.

We appreciate your efforts to capture an accurate start date and obtain quantitative viral loads at appropriate points in therapy. By partnering together to help ensure patients adhere to therapy, we can maximize the clinical cure rates of HCV.

Thank you for your continued commitment to the members of Maryland Medicaid.

¹ The AASLD/IDSA guidelines recommend obtaining a quantitative HCV viral load after 4 weeks of therapy to assess the initial viral response as well as adherence.